

## Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

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|---|-------------|----------|----------------------------|-----------------------|---------------------------------|---|----------------|--------------|
| McDonald's (Saliba Charleston Rd 11c)   |             |          |                            |                       | Telephone Number                | Date of Inspection (mm/dd/yr)  PERMIT # |                |              |
| Establishment Address (number and street, city, state, zip code)                  |             |          |                            |                       |                                 | 7 / 2                                   | 1/20           | 19-255       |
| 2621 Charleston Rs. New Albery, W 47150   |             |          |                            |                       | 859 609 7798                    | 3/                                      | 1/20           |              |
| Owner   | <del></del> | ,,,,,,   | 145. 1400 / [[[]           | , 50 , 100            | Purpose:                        | Follow                                  | un Dalan       | no Doto      |
| Matt Dad  |             |          |                            |                       | Boutine                         | Follow-up Release Date  // day 5        |                |              |
| Owner's Address   |             |          |                            |                       | 2. Follow-up                    | Summary of Violations:                  |                |              |
| P.O. BOX 379 LaGrange, KY 40031   |             |          |                            |                       |                                 | Summar                                  | y of Violation | 18;          |
| Person in Charge  |             |          |                            |                       | 3. Complaint 4. Pre-Operational | 4. Pre-Operational C NC NC              |                |              |
| Kristin Lee   |             |          |                            |                       | 5. Temporary                    |   |                |              |
| Responsible Person's E-mail   |             |          |                            |                       | 6. HACCP                        | Menu Ty                                 | pe (See back   | of page)     |
|   |             | _        |                            |                       |                                 |   |                |              |
| Certified Food Manager Kristin Lee (2/20/24)                                      |             |          |                            |                       | 7. Other (list)                 | 12                                      | 2 <u> </u>     | _45          |
| Kristin   | n Lec       | 1 2      | 120 /24)                   |                       | <u> </u>                        |   |                |              |
| • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" |             |          |                            |                       |                                 |   |                |              |
| • VIOLATIO  | ON(S) REPE  | CATED    | FROM PREVIOUS INSPECTIO    | NS ARE DENOTED IN THI | E "SUMMARY OF VIOLATIONS" AI    | ND IN THE                               | NARRATIVE      | BELOW AS "R" |
| Section#  | C/NC        | R        |                            | Narrative             | e                               | <del></del>                             | To Be Co       | orrected By  |
|   |             |          |                            |                       |                                 | _                                       |                |              |
|   |             |          | No violations. All         | 1                     | 1.                              |   |                |              |
| <u> </u>  | -           |          | No violations. /T          | corrections ma        | <del>4.</del>                   | -                                       | _              |              |
|   |             | <u> </u> |                            |                       | <del></del> .                   |   |                |              |
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|   |             |          | <u>-</u>                   |                       |                                 |   |                |              |
|   |             |          |                            | <del>_</del> .        |                                 | <del></del>                             |                | ——— <u> </u> |
| Received by   | (name and   | title n  | rinted):                   |                       | Inexpected by (name and 414)    | rintad):                                |                |              |
| Received by (name and title printed):  Krissi Lee General Manager                 |             |          |                            |                       |                                 | Inspected by (name and title printed):  |                |              |
|   |             |          |                            |                       | A.J.                            | Lagran                                  | (EHS)          |              |
| Received by (signature):  |             |          |                            |                       | Inspected by (signature):       | •                                       |                |              |
| the the   |             |          |                            |                       |                                 | y                                       |                |              |
| cc:   |             |          |                            | <del></del>           |                                 | cc:                                     |                |              |